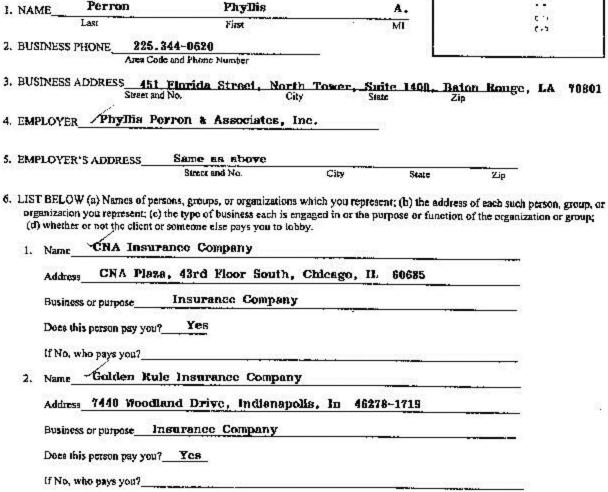
To be used for initial registrations and renewals. Registrations expire on January 31 unless a renewal is submitted between December 1 and January 31, 1999

Instructions

- · Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.



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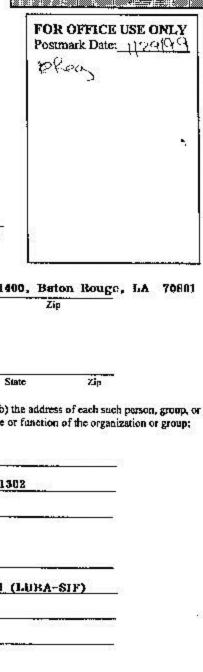
REGISTRATION ONLY

| 3. Name Louisiana Funeral Directors Association | |
|-------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| Address 9595 Floride Boulevard, Deton Rouge, | LA 70815 |
| Business or purpose Trade Association | 10.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20.00 20 |
| Does this person pay you? Yes | arthur in various. |
| If No. who pays you? | |
| 4. Name Louisiana Insurers' Conference | |
| Address 451 Florida Street, North Tower, Suite. | 1400, Baton Rouge, LA 70801 |
| Business or purpose Trade Association | |
| Does this person pay you? Yes | · |
| If No, who pays you? | 200 |
| Name Louisiana life & Health Insurance Guara | mty Association |
| Address 451 Florida Street, North Tower, Suite | 1400, Baton Roue, LA 7080] |
| Business or purpose Guaranty Association | 50 34 0000 0040 0040 |
| Does this person pay you? Yes | |
| If No, who pays you? | |
| ST SHOUTH STANDARD CO. | 35-4C |
| State of Louisians Parish of East Buton Rouge | |
| Sefore mn, the undersigned authority, personally came and appeared | Phyllis A. Perron upo som hab |
| duly swom by me, did declare and acknowledge to me that the above state | |
| Signature of Pobbyist | Den- |
| Sworn to and subscribed before me on this 19th day of | |
| January 19 49. | ATTACH |
| Shaw I Colomb | 2" x 2" PHOTOGRAPH |
| Notary Public | HERE |
| Rev 8.007 | FOR INITIAL |

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Lobbyist's Registration Number

| ı. | NAME | Perron | | Phyllis | A | | |
|----|------------|----------------|---------------------------------------------------------|--------------------|-------------|------------|----------------------------------|
| 20 | 15040 1000 | Last | 2010 | First | | МІ | |
| 2. | BUSINESS | | 225/344-0626 Area Code and Phone | | | | |
| 3. | BUSINESS | ADDRESS_ | 451 19mrida Brest and No. | | rth Tower, | State 1400 | Baton Rouge, I |
| 4, | EMPLOYI | R Phyl | lis Perron & | Associates, | Inc. | | |
| 5. | EMPLOYI | er's addre | | as above | City | State | Zin |
| | | | | | vig | 340 | |
| | l. Name | e Lou | ctient or someone islana United O. Box 1302, 50 Trade A | Businesser | Associatio | | |
| | | | ay you? Yes | | | | |
| | 2. Name | Louisi | iana United F | <u>azeazontaut</u> | Solf Insure | d Fund (Li | UBA-SIF) |
| | Addr | ess P. O | . Box 2598 1 | Baton Rouge | , LA 7082 | 1-3598 | |
| | Busin | ness or purpo: | se <u>lmaura</u> | nce | | 1004233300 | 3 5: X ² (|
| | Does | this person p | ay you? Yes. | | | | |
| | | | | | | | |



ONLY

| 3. Name Reinsurance Association of America | | |
|--------------------------------------------------------------------------|-----------------------------|------------------|
| Address 1501 Pennsylvania Avenue, N.W., Suite | 900, Washington, DC | 20004 |
| Business or purpose Reinsurance Association | | |
| Does this person pay you? Yes | | |
| If No, who pays you? | | - |
| 4. Name Schering Plough External Affairs, Inc. | | 20.000 20.000 |
| Address 2000 Galloping Hill Road, Kennilworth. | NJ 07033 | <u></u> |
| Business or purpose Pharmaceutical Company | | <u>81</u> |
| Does this person pay you? You | | |
| If No, who pays you? | | |
| 5. Name Allstate Insurance Company, Namey Lemks | | |
| Address 7000 Contral Perkway, Suite 700, Atlant | | |
| Business or purpose Insurance Sales | | |
| Does this person pay you? You | | ii. |
| If No, who pays you? | | |
| | | |
| State of Louisiana | | |
| Parish of Rast Baton Rouge | | |
| Before me, the undersigned authority, personally came and appeared P | | who, after being |
| duly sworn by me, did declare and acknowledge to me that the above state | ments are true and correct. | |
| Signature of Lobby ist | 110r- | |
| Sworn to and subscribed before me on this 19th day of | | 2 30 32 |
| January 1997. | ATTACH | |
| Shaw I Colomb | 2" x 2" PHOTOGRAPH | 10 |
| Notary Public | HERE FOR | 4 |
| Rev. 8/97 | INITIAL REGISTRATION | v |

To be used for initial registrations and renewals, Registrations expire on January 31 unless a renewal is submitted between December 1 and January 31.

Instructions

· Print in ink or type,

1. NAME

Perron

Does this person pay you? Yes

If No, who pays you?_

Lag

- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
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Phyllis

First

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| e address of each such person, function of the organization of | group; |
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| 201 | |

| 2. | BUS | INESS PH | ONE | 225/34 | 14-0620 | | | 1 | |
|----|-----|-----------------------|------------|---------------------|-----------------------------|-------------|-------------|----------------------|---------------------|
| | | | | Area Code | and Phone Nun | ipel | -32 | 9) | 0.000 |
| 3. | BUS | INESS AI | | 451 Street and h | <u>Florida S</u> lo. | treet, Nort | h Tower. | Suite 1400. | Baton Roug Zip |
| 4, | ЕМР | LOYER_ | Phy | llis Per | ron and / | Associates. | Inc. | 20 | |
| 5. | EMP | COYER'S | S ADDR | ess | Same as | s above | | ** | |
| | | | | | Street and N | lo. | Chy | State | Zip |
| | (d) | whether of Name | or not the | client or s | omeone else p secciation | of Temper | y. | | tion of the organiz |
| | | Business Does this | 20 15 | sc | Yos | ociation | Color | 12-17 SOUSSER | |
| | | If No, wi | ho pays y | 2טטי | | | | 100 Mar | |
| | 2. | Name <u>\</u> | Life | Skilla F | oundation | | <u> </u> | V6 <u>V-3</u> | <u> </u> |
| | | Address_ | 893 | A East | Park Ave | nuc, Talla | bessee, Flo | rida <u>. 3220</u> 1 | <u> </u> |
| | | Business | or purpo | se | | | | | |



REGISTRATION ONLY

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|--------------------|-------------------|---------------------|------------------|---------------|----------|-----------------------|
| Name | Alliance | of American In | C11 7 040 | | | |
| 10000000 | | lorado Avenue, | | Austin. | TX | 78701 |
| | SAME . | Trade Association | | | | |
| Does this per | son pay you?_ | You | | - | | |
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| Namo | 100 | 76667247 2012 | | | | |
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| ete of Loui | | 002. 3900/d | | | | |
| rish of <u>Kas</u> | | | | | | |
| | | | | | | Perron , who, after |
| iy sworn by me | e, did declare at | d acknowledge to me | Cloo | -4 | e true : | and correct. |
| yorn to and sub | scribed before (| ne on this 19th da | | | | |
| Quanas, | | | | | | ATTACH |
| Stan | V. Colm | 1 | | | | 2" x 2" PHOTOGRAPH |
| otary Public | des o Activities | - | | | | HERE FOR |
| ev. 8/97 | | | | | | INITIAL |



STATE OF TOUISIANA DEPARTMENT OF STATE CIVIL SERVICE LOUISIANA BOARD OF ETHICS

84/J1 UNITED PLAZA BOULEVARD SUITE 200 BATON HOLICE, LA 70809 7017

HATON FIDLICE, LA 70809 701 (504) 927-1400 FAX [504] 922-1414

February 6, 1999

Phyllis A. Perron 451 Florida St. North Tower Suite 1400 Baton Rouge, La 70801

Dear Lobbyist:

The Louisiana Board of Ethics received your Lobbyist Registration Form. Your Registration was accepted and filed. You have been assigned Lobbyist Registration Number 314 for the year 1999. I have enclosed a receipt for your registration fee.

If you have any questions, please feel free to contact the staff of the Ethics Administration Program.

Very truly yours,

LOUISIANA BOARD OF ETRICS

Keepped Digram pame

Kathy Dedon

Enclosure

| PERRON AND FLORIDA ST., HORTH BATON ROUGE | TOWER, STE. 1400 | • | 7186 |
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| | SULLY HOARD OF ETHICS UNITED AZA SUCTOR STATEMENT AND STA | Receipt Date Receipt Date Property and September 1999 Prop | BOARD of ETHICS TWENTY AND 0%00 NB CITY NATIONAL BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK CORP BANK C |

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